



ONLINE COURSE EXTENSION/REACTIVATION FORM

NAME \_\_\_\_\_
Last First

PLEASE HELP US TO IDENTIFY YOUR RECORD BY PROVIDING ONE OF THE FOLLOWING:

LAST 4 DIGITS OF SSN: \_\_\_\_\_ -OR- JFKU STUDENT ID #: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

PHONE NUMBER (Area code) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

COURSE ACCESS FOR WHICH EXTENSION/REACTIVATION IS REQUESTED:

(NOTE: COURSE ACCESS IS GRANTED OR EXTENDED FOR ONE (1) MONTH. YOU WILL BE SENT NOTICE OF ACCESS BY EMAIL.)

COURSE TITLE: \_\_\_\_\_

ORIGINAL REGISTRATION DATE: \_\_\_\_\_

EXTENSION/REACTIVATION FEE: \$35.00

METHOD OF PAYMENT:

- Check (payable to JFK University - CE)
VISA
Mastercard
American Express

CREDIT CARD #: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PLEASE MAIL OR FAX THIS FORM ALONG WITH PAYMENT TO:

JFK University, CE
100 Ellinwood Way
Pleasant Hill, CA 94523-4817

